

OFFICE OF THE CITY CLERK City and County of Honolulu Honolulu Hale Honolulu, Hawaii 96813-3077 Telephone: 768-3810

DISCLOSURE OF FINANCIAL INTERESTS PUBLIC DISCLOSURE FORM

FOR CALENDAR YEAR 2019

(PRINT OR TYPE CLEARLY)

NAME_	Noel T. Ono	OSITION/ELECTIVE OFFICE Assistant Director					
DEPAR ⁻	DEPARTMENT/AGENCY Human Resources						
	of Spouse Myra S. Ono						
Check the	e appropriate box and fill in any applicable dates:						
	INITIAL STATEMENT: Date on which you assumed office or began employment in this position You must file within twenty (20) working days after this date disclosing financial interests held during the preceding calendar year.						
\checkmark	ANNUAL STATEMENT: You are required to financial interests held during the preceding ye	le not later than January 31 of each year disclosing all ar.					
	LEAVING OFFICE STATEMENT: You are leaving or have left your office on and must file a statement within ten (10) working days of that date. You must disclose financial interests held during the preceding calendar year.						
	CANDIDATE STATEMENT: You must file no later than ten (10) working days after the deadline for filing as a candidate for office disclosing interests held during the calendar year preceding the due date of the statement.						
VERIFICATION							
through	I declare that I have used all reasonable diligence in preparing this form, that I have reviewed Item Nos. 1 through 9, and to the best of my knowledge the information provided in this form is true and correct.						
Date January 3 , 20 20 Signature Owy 5, Chro							

GENERAL INSTRUCTIONS

All questions must be answered in regard to yourself, your spouse, and all dependent children. Use Abbreviations:

All items on the form must be completed. If you have no information to disclose under a particular item, check "None". If additional space is required to complete an item, check "Additional sheets attached". Make a copy of your completed financial disclosure form for your records for future reference.

Disclosures need not be made by exact dollar amounts but may be reported by "range of value". You may indicate the value of a reportable interest by using the appropriate letter from the following codes:

A. Less than \$1,000	E. \$50,000 - \$99,999	I. \$300,000 - \$399,999	M. \$700,000 - \$799,999
B. \$1,000 - \$9,999	F. \$100,000 <i>-</i> \$149,999	J. \$400,000 - \$499,999	N. \$800,000 - \$899,999
C. \$10,000 - \$24,999	G. \$150,000 - \$199,999	K. \$500,000 - \$599,999	O. \$900,000 - \$999,999
D. \$25,000 - \$49,999	H. \$200,000 - \$299,999	L. \$600,000 - \$699,999	P. At least \$1,000,000

1. INCOME. Only report compensation earned for services rendered equal to \$1,000 a year or more from any employment including, but not limited to, income from the City, retirement, social security, and deferred compensation. Do not report interest, dividends, alimony, property settlements, or child support payments. Individual items of compensation that constitute a portion of the gross income of a business or profession need not be disclosed. Report income from rental property here.

None	Additional sheets attached
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Recipient	Employer/Source	Position/Service Rendered	When	Annual Income
F	City & County of Honolulu	Assistant Director	1/1-12/31/19	F
F	HGEA/AFSCME	Retirement	1/1-12/31/19	D
F	Social Security	Social Security Benefits	1/1-12/31/19	D
SP	City & County of Honolulu	Private Secretary II	1/1-12/31/19	E
SP	HGEA/AFSCME	Retirement	1/1-12/31/19	В
SP	Social Security	Social Security Benefits	1/1-12/31/19	С

[&]quot;F" for filer

[&]quot;SP" for spouse

[&]quot;DC" for dependent children

[&]quot;JT" for joint interests of the filer and filer's spouse

CREDITORS. Do not report any debts of less than \$3,000. Do not report debts that arise out of retail installment transactions for the purchase of consumer goods, whatever the amount. Do report a secured obligation such as a home mortgage or a car loan. Do report student loans.								
☐ None ☐ Additional sheets attached								
Creditor	Original Loan A	mount Amou	nt Outstanding					
Wells Fargo	K	J						
Aloha Pacific Federal Credit Union	H	E						
OWNERSHIP OR INTERESTS IN BUSINESSES IN THE STATE. Only report ownerships or beneficial interests having a value of \$5,000 or more or equal to 10% or more of ownership of businesses incorporated, regulated, or licensed to carry on business in Hawaii. Do not report accounts in federal or state regulated financial institutions, mutual insurance policies, or individual items in a mutual fund or blind trust, if the fund or trust is disclosed under this item.								
Additional sheets attache	ed	<u>, </u>						
Business Name and Address	Nature of Business	Percentage of Interest	Value of Interest					
	actions for the purchase as a home mortgage or a ditional sheets attached Creditor Wells Fargo Aloha Pacific Federal Credit Union OR INTERESTS IN ests having a value of sulated, or licensed to calcial institutions, mutual or trust is disclosed unconditional sheets attached business Name and	actions for the purchase of consumer goods, as a home mortgage or a car loan. Do report so ditional sheets attached Creditor Original Loan A Wells Fargo K Aloha Pacific Federal Credit Union OR INTERESTS IN BUSINESSES IN The sts having a value of \$5,000 or more or equivaled, or licensed to carry on business in Hawaiial institutions, mutual insurance policies, or or trust is disclosed under this item. Additional sheets attached Business Name and	actions for the purchase of consumer goods, whatever the amount as a home mortgage or a car loan. Do report student loans. ditional sheets attached Creditor Original Loan Amount Amount Wells Fargo K J Aloha Pacific Federal Credit Union CR INTERESTS IN BUSINESSES IN THE STATE. Only rests having a value of \$5,000 or more or equal to 10% or more of ow ulated, or licensed to carry on business in Hawaii. Do not report accountial institutions, mutual insurance policies, or individual items in a or trust is disclosed under this item.					

	es incorpora	tional sheets attached				
Owne	rship or Inte	rest Date of Tra	ansfer			
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positions also incl	as trustee i ude being a s in non-prof	ONS. Fiduciary positions inc n any business or organizati majority shareholder in a sn it corporations. tional sheets attached	ion, whether or not	operated for	profit. Fig	duciary positions
Position	Holder		Name & Address of Business or Organization			Annual Compensation
6. CREDIT	OR INTERE	STS IN INSOLVENT BUSIN	NESS worth \$5,000	or more.		
✓ None	e ∐Additio	nal sheets attached				
		Name & Address of Business			Business	
*						

7.	CLIENTS PERSONALLY REPRESENTED BEFORE CITY AGENCIES. Only report representation for which you have received compensation during the preceding calendar year. Do not report representation involving ministerial matters. "Ministerial matters" do not require discretionary authority and do not need to be disclosed.							
	✓ None	✓ None —Additional sheets attached						
	Representative		Client City Age		ency	Nature of Representation		
				-				
	8. REAL PROPERTY OWNED. Only report real property owned. Report the value of the property in any reasonable manner, such as assessed value. You are not required to report the tax map key number and street address for your personal residence or the personal residence of your spouse or dependent children; if you choose not to report the tax map key number and street address, identify instead as "personal residence." None Additional sheets attached							
	Owner(s)	Tax Map	Key Number & Stre	et Address	Value	Year Obtained		
	JT	(1) 2-2-33-53	103 Rosebank I	Place	P	1992		
	9. REAL PROPERTY TRANSFERRED. Only report real property transferred in the City and County of Honolulu during the preceding calendar year. For this item, indicate the actual amount of the transaction, even if it is less than the value (as in the case of a gift). You are not required to report the tax map key number and street address for your personal residence or the personal residence of your spouse or dependent children; if you choose not to report the tax map key number and street address, identify instead as "personal residence." None Additional sheets attached							
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	Seller/Donor	Buyer/Donee	Date	Price	Tax Map Ke	ey Number & Street Address		